

Active Assailant Overview:

This is a remote training session with three to four of your officers. The scenario also requires an officer to be in command. It is your choice if you will be in command of the event or if you wish one of your officers to be 'command.' The remaining officers will be a supervisor for one of the following groups:

Triage
Transport
Treatment

The officers will need to be at a computer terminal and have a radio available. Please contact B/C Baltrosky to secure a talkgroup for the training. Included are links to documents for you to email to your officers as the training unfolds.

Goals:

Utilize the **task list** to evaluate the participants in the events. In addition to the benchmarks, each event has individual milestones that should be reached.

Task list link:

<https://www.dropbox.com/s/azm01hwr95isfhk/Task%20List%20for%20EMS%20Incidents%20Multi%20Casualty.doc?dl=0>

This document will provide you with the framework to facilitate the training. There are specific interactions that you should have with your unit officers – these interactions are included in the document. Feel free to add or remove information at your will.

Active Assailant Event Overview

Type:
Shooting – ALS2

Address:

Pick an office park in your first due to add authenticity

Dispatched units:

3 or 4 of your primary units – two must be Paramedic Engines, as they are dispatched on the EMS task force. Add 5 transport units to the call – these units are available for transport and they will ghost units unless you wish to verbalize them checking on the scene on the radio.

Note: there is a similar event in another battalion, and there are no other units available for dispatch.

Comments:

Police are on the scene. The scene is safe – the threat has been neutralized. There are multiple shooting victims.

Goals:

- Maintain communication between supervisors and command
- Proper distribution of patients between trauma centers

Milestones:

- Establish command
- Designate supervisors for
 - Triage
 - Transport
 - Treatment
 -

Patient information:

- Patients have been assembled in a casualty collection point
- Total Patients: 7
 - Acuity
 - 2 Deceased
 - 3 Immediate
 - 1 Delayed
 - 1 Minor

Transport units:

Transport units in a MCI should be moving patients. There are no additional transport units available in the county. If command or one of the group supervisors dedicates a transport unit to a task other than that of transporting a patient, do not allow the unit to be used for transport without adding a significant delay to its availability.

Active Assailant

Send your officers emails with links to these documents or the documents in attachments. Stagger the officers' arrival as you see fit. All of the officers should receive these photos as they arrive on scene:

https://www.dropbox.com/s/q2vrnux53vngjxs/7185561_G.jpg?dl=0
https://www.dropbox.com/s/i92490dd95nioyw/7185563_G.jpg?dl=0

The unit that is **command** should receive this document:

https://www.dropbox.com/s/6wb6fvlo96vuzh0/local_command_charts.pdf?dl=0

The **triage group supervisor** should receive this document:

<https://www.dropbox.com/s/el9roh4zuwtmw2h/MC%20Triage%20Unit%20Leader%20%231.pdf?dl=0>

The **transport group supervisor** should receive these documents:

<https://www.dropbox.com/s/rx3od22a70xbubl/Transportation%20Supervisor%20Checklist.pdf?dl=0>

<https://www.dropbox.com/s/bse56qlh3whnkz8/MC%20Transportation%20Group%20Supervisor%234.pdf?dl=0>

<https://www.dropbox.com/s/eluf9uwmalm2sac/MIEMSS%20Transportation%20Disposition%20Officer%20Log.doc?dl=0>

<https://www.dropbox.com/s/72pl5fn7ef86l3e/MC%20Medcomm%20Worksheet%20%233.pdf?dl=0>

The **treatment group supervisor** should receive these photos and documents:

Photos

https://www.dropbox.com/s/hlam4n6n9f0dfrv/f_ots_calif_shooting_response_151202.nbcnews-ux-1080-600.jpg?dl=0

<https://www.dropbox.com/s/gfskaf0nss2rvwg/shooting131.jpg?dl=0>

Documents

<https://www.dropbox.com/s/khkuqna2ophjp02/Treatment%20Supervisor%20Checklist.pdf?dl=0>

<https://www.dropbox.com/s/el9roh4zuwtmw2h/MC%20Triage%20Unit%20Leader%20%231.pdf?dl=0>

<https://www.dropbox.com/s/zw4whrddl7cxjji/MIEMSS%20Patient%20Tracking%20form.xls?dl=0>

Active Assailant
Triage Group Supervisor Interaction

The triage group supervisor should utilize their crew to perform the triage. The supervisor should receive this return from their crew:

Patients

- 7 total – all traumas
- Acuity
 - 2 Deceased
 - 3 Immediate
 - 2 Pediatric
 - 1 Adult
 - 1 Delayed
 - Adult
 - 1 Minor
 - Pediatric

The triage group supervisor should relay this information to command via the radio.

Active Assailant Transport Group Supervisor Interaction

The transport group supervisor will need to obtain hospital bed availability and track the patients as they are moved to the hospitals.

This is the bed availability:

- Baltimore Shock Trauma
 - 4 Immediate
 - 2 Delayed
 - 0 Minor
- Children's DC
 - 3 Immediate
 - 4 Delayed
 - 0 Minor
- Suburban Trauma
 - 1 Immediate
 - 1 Delayed
 - 1 Minor
- MedStar Trauma
 - 2 Immediate
 - 2 Delayed
 - 0 Minor

The transport group supervisor is responsible for managing the ambulance staging area. These are the 5 ambulances dispatched in the EMS task force. There are no additional transport units available.

The transport group supervisor should coordinate with the treatment group supervisor and move the patients out to the appropriate hospitals as soon as the patients are ready. They should also document the amount of patients transported to each hospital and the destination for each patient.

The transport group supervisor and the treatment group supervisor should be communicating to each other via the radio.

The transport group supervisor, or their designee, is the only person that shall communicate with the hospitals.

Active Assailant Treatment Group Supervisor Interaction

The treatment group supervisor will utilize the crew of their unit to treat the patients as they arrive in treatment area.

The crew from the triage group should be reassigned to work under the treatment group supervisor after triage is complete. This manpower unit will be the victim carriers needed to assemble the patients in the treatment area. The treatment area should be in the cold zone - away from the casualty collection point.

The facilitator should tell the treatment group supervisor when they have patients in the treatment area and when the victims are ready for transport. The immediates should be moved out first, followed by delayed, and then minor. Randomize the severity of the victims that are arriving and ready for transport so that the supervisor may execute the proper decisions.